State Advisory Council on Quality Care at the End of Life Minutes from the June 2, 2014 Meeting

Meeting time and place: June 2, 2014, 10:00 a.m, Department of Aging, 301 West Preston Street, Baltimore, Maryland.

Council members present: Ted Meyerson, Chair; Paul Ballard (Attorney General's designee); Michael Safra; Marian Grant; Sister Lawrence Mary Pocock; Hope Miller; Gail Mansell; Catherine Stavely; Tricia Nay (Department of Health and Mental Hygiene's designee); Michael Safra; Donna DeLano Neuworth (Department of Aging's designee); Jane Markley. On speakerphone: Lya Karm; Steve Levenson; Hank Wilner; Mary Lynn McPherson; Alice Hedt on behalf of the Department of Aging; Anna Blackfield on behalf of the Department of Disabilities.

Others present: Maryann Hong; Catherine Florea.

Chairman Ted Meyerson convened the meeting at 10:00 a.m.

Paul Ballard provided a legislative update regarding the 2014 legislative session of the Maryland General Assembly. House Bill 134 that would have required the Governor to annually proclaim April 16 as National Healthcare Decisions Day was supported by the Council, but the hearing regarding this bill was cancelled. House Bill 1068 received an unfavorable committee report and was withdrawn. This bill would have required the Department of Health and Mental Hygiene to study the feasibility of allowing mentally competent, terminally ill adult patients to request and receive prescription medications to end their lives and to study laws in states where this practice is allowed. The Council took no position on the bill but informed the legislative committee that the Council should be involved in any required study in the event the bill passed. House Bill 881 regarding medical marijuana passed, which bill contained measures to facilitate the use of medical marijuana, including provisions regarding the certification of physicians, the licensure of growers and dispensaries, and the creation of identification cards for patients and caregivers. The Council had supported House Bill 881.

Ted Meyerson discussed the educational videos regarding advance directives and the MOLST form that had been developed by the Council and produced by WBAL. He stated the videos would be placed on the Attorney General's website and that he would like to send a letter to nursing homes, assisted living programs, and other health care facilities informing them that the videos may be downloaded from the website or that a DVD containing the videos could be sent to them. Marian Grant noted that making the videos available online would result in their wider distribution. Tricia Nay stated that the videos could be put on the MOLST and OHCQ websites. Alice Hedt said that the Department of Aging's ombudsmen could take information to nursing homes and 40% of assisted living programs, as well as to consumer groups. Ted Meyerson requested that Council members provide email addresses of organizations that could use the videos.

Paul Ballard provided the Council with a list of possible projects for consideration. He also suggested that the Council form standing committees to consider legislation, educational initiatives, reimbursement, and quality care standards. The Council approved the formation of

standing committees for legislation, education, and quality care standards. Ted Meyerson, Donna DeLano Neuworth, and Catherine Stavely volunteered to serve on the legislative committee. Hank Wilner, Lynn McPherson, Michael Safra, Alice Hedt, and Jane Markley volunteered to serve on the education committee. Steve Levenson, Gail Mansell, Tricia Nay, Hope Miller, Lya Karm, Donna Leister, and Sister Lawrence Mary Pocock volunteered to serve on the quality care standards committee.

In terms of possible projects, the Council discussed examining the effectiveness of the MOLST form. Steve Levenson stated that hospitals are completing only page 1 of the MOLST form regarding CPR and that the guidance provided by decision makers is not always correct. He suggested that the Council should look at the procedures hospitals use to complete MOLST forms and recommended that the Council suggest a better process. Council members noted that the length of stay is shorter in hospitals than other settings and that may be a contributing factor to the failure to complete page 2 of the MOLST form, which page concerns orders regarding life-sustaining treatments other than CPR. Steve Levenson suggested that a sample of nursing homes and hospitals be surveyed to examine what issues are being identified regarding the accuracy and completeness of forms coming from hospitals and nursing homes, and then give feedback to the hospitals and nursing homes regarding the findings.

Tricia Nay stated that although she has heard that hospitals are not filling out the MOLST form correctly, the Office of Health Care Quality has not been receiving complaints regarding this issue. Instead, the surveys that have been completed by the Office of Health Care Quality have shown that in general MOLST forms are being completed correctly. Alice Hedt stated she does not think all patients are receiving copies of the MOLST form. Michael Safra recommended that the Council investigate ways in which the process for completing the MOLST form could be implemented better and to devise systems and protocols to make this process more user-friendly. The Council agreed with this recommendation.

The Council also considered whether to look at the issue of obtaining authorized decision makers for patients without families or friends. Some members thought that hospitals were filing guardianship petitions but it was noted that smaller providers may not be doing this. Alice Hedt noted that the ability of the Department of Aging to find guardians is limited. Tricia Nay stated that often patient care advisory committees issue recommendations in such cases. Marian Grant stated that this could be a growing problem in the future as families get smaller. The Council also considered whether to study the issue of medical ineffectiveness. Although Council members felt these were all important issues, the consensus of the Council was to focus its energies at this time on studying ways to improve the processes to implement the MOLST form.

Lynn McPherson informed the Council that the basic online training course for health care providers regarding the assessment and treatment of pain among older adults with advanced illness in nursing homes and assisted living programs has been completed and is out for review. The course should be implemented shortly. Lynn is also seeking another grant to educate health facility surveyors about appropriate medication management at the end of life.

No further items of business being presented, Chairman Meyerson adjourned the meeting.